## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where ap in m

ppropriate. All further adicated unless correct naintenance fee notifica	ed below or directed	luding the P d otherwise	atent, advance of in Block 1, by (a	rders and notification of a) specifying a new cor	f maintena responden	ince fees wi	ll be mand/or (	ailed to the current b) indicating a separ	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
34610	7590	03/14/2008						f Mailing or Transn	nission	
KED & ASSOCIATES, LLP						I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile				
P.O. Box 221200						o the Mail	Stop IS	SUE FEE address	above, or being facsimile	
Chantilly, VA 2	0153-1200			tr	ansmitted	to the USPT	O (571)	273-2885, on the da	te indicated below.	
				_					(Depositor's name)	
				<u> </u>					(Signature)	
									(Date)	
APPLICATION NO.	TION NO. FILING DATE			FIRST NAMED INVENTO	OR	ATTORNEY DOCKET N			CONFIRMATION NO.	
10/719,013	10/719,013 11/24/2003			Francesc Casas Salva		MDR-0004			9165	
TTLE OF INVENTION	: COMPRESSED C	GAS OPERA	FED PISTOL							
									•	
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE DU	E PREV.	PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	ovisional YES		\$720 \$300			\$0		\$1020	06/16/2008	
EXAMINER		1	ART UNIT	CLASS-SUBCLASS	$\neg$					
СНАМВЕ		3641	124-074000							
. Change of correspond	ence address or indi	cation of "Fe	e Address" (37	2. For printing on the	e patent fro	ont page, list		KED & V	SSOCIATES, LLI	
FR 1.363).				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(2) the name of a single firm (having as a member a 2						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney of agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
. ASSIGNEE NAME A	ND RESIDENCE D	DATA TO BE	E PRINTED ON	THE PATENT (print or	type)			-		
PLEASE NOTE: Un	less an assignee is i	identified bel	low, no assignee	data will appear on the T a substitute for filing	patent. I	f an assigne	e is ide	ntified below, the do	ocument has been filed for	
(A) NAME OF ASSI		сопірленов о	i diis ioiii is ivo	(B) RESIDENCE: (CI	_		OUNTR	.Y)		
INDUSTRIAS EL GAMO, S.A. BARCELONA, SPAIN								,		
					_		.•		<b>П</b> о	
lease check the appropr	riate assignee catego	ory or categor	ies (will not be p	rinted on the patent):	└ <b>─</b> Individ	lual 🔼 Co	rporatio	n or other private gro	up entity Government	
a. The following fee(s)	are submitted:		41	b. Payment of Fee(s): (P	lease first	reapply an	y previo	ously paid issue fee s	shown above)	
☑ Issue Fee ☐ A check is enclo										
Publication Fee (1		Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of Copies				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-0607 (enclose an extra copy of this form).						
. Change in Entity Sta										
a. Applicant claim	b. Applicant is no l	-	-							
NOTE: The Issue Fee ar nterest as shown by the	nd Publication Fee (i records of the Unite	f required) w d States Pate	ill not be accepte nt and Trademark	d from anyone other tha k Office.	n the appli	icant; a regis	stered at	torney or agent; or th	e assignee or other party in	
Authorized Signature	. //	1 show	mel		Da	te <b>Jur</b>	ne 11	, 2008		
Typed or printed name		Eisenh	art			gistration N	o3	8,128		
his collection of inform	nation is required by	37 CFR 1 31	1. The information	on is required to obtain	or retain a	benefit by th	ie public	which is to file (and	by the USPTO to process)	
n application. Confider	itiality is governed b	oy 35 U.S.C. to the HSPT(	122 and 37 CFR Time will vary	1.14. This collection is depending upon the in	estimated dividual ca	to take 12 n ase. Anv co	ninutes t mments	to complete, including on the amount of tire	g gathering, preparing, and ne you require to complete	
nis form and/or suggest	ions for reducing the	is burden, sh	ould be sent to th	ne Chief Information Of	icer, U.S.	Patent and	Fradema	rk Office, U.S. Depa	artment of Commerce, P.O. for Patents, P.O. Box 1450,	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.